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|--|---|--|-------------------|---|----------------------|
| AO 435<br>(Rev. 03/08)   |   | Administrative Office of the United States Courts                          |                   | <b>FOR COURT USE ONLY</b><br><b>DUE DATE:</b>         |                      |
| <b>TRANSCRIPT ORDER</b>  |   |  |                   |   |                      |
| <i>Please Read Instructions:</i>   |   |  |                   |   |                      |
| 1. NAME<br>Katie O'Leary   |   | 2. PHONE NUMBER<br>(617) 728-8795  |                   | 3. DATE<br>6/11/2013                                  |                      |
| 4. MAILING ADDRESS<br>Office of Bar Counsel 99 High Street   |   | 5. CITY<br>Boston  |                   | 6. STATE<br>MA  | 7. ZIP CODE<br>02110 |
| 8. CASE NUMBER<br>1:2011-cr-00186-S-PAS-1  | 9. JUDGE<br>Judge William E. Smith                                      | DATES OF PROCEEDINGS<br>10. FROM 4/24/2013      11. TO 4/24/2013           |                   |   |                      |
| 12. CASE NAME<br>USA v. Joseph Caramadre   |   | LOCATION OF PROCEEDINGS<br>13. CITY Providence      14. STATE Rhode Island |                   |   |                      |
| 15. ORDER FOR<br><input type="checkbox"/> APPEAL <input type="checkbox"/> CRIMINAL <input type="checkbox"/> CRIMINAL JUSTICE ACT <input type="checkbox"/> BANKRUPTCY<br><input type="checkbox"/> NON-APPEAL <input type="checkbox"/> CIVIL <input type="checkbox"/> IN FORMA PAUPERIS <input checked="" type="checkbox"/> OTHER Mass BBO |   |  |                   |   |                      |
| 16. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested) <i>all of vol. 1 4/24/13</i>  |   |  |                   |   |                      |
| PORTIONS   |   | DATE(S)  |                   | PORTION(S)  |                      |
| <input type="checkbox"/> VOIR DIRE   |   |  |                   | <input type="checkbox"/> TESTIMONY (Specify Witness)  |                      |
| <input type="checkbox"/> OPENING STATEMENT (Plaintiff)   |   |  |                   |   |                      |
| <input type="checkbox"/> OPENING STATEMENT (Defendant)   |   |  |                   |   |                      |
| <input type="checkbox"/> CLOSING ARGUMENT (Plaintiff)  |   |  |                   | <input type="checkbox"/> PRE-TRIAL PROCEEDING (Specy) |                      |
| <input type="checkbox"/> CLOSING ARGUMENT (Defendant)  |   |  |                   |   |                      |
| <input type="checkbox"/> OPINION OF COURT  |   |  |                   |   |                      |
| <input type="checkbox"/> JURY INSTRUCTIONS   |   |  |                   | <input type="checkbox"/> OTHER (Specify)              |                      |
| <input type="checkbox"/> SENTENCING  |   |  |                   |   |                      |
| <input type="checkbox"/> BAIL HEARING  |   |  |                   |   |                      |
| 17. ORDER  |   |  |                   |   |                      |
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| CERTIFICATION (18. & 19.)<br>By signing below, I certify that I will pay all charges (deposit plus additional).  |   |  |                   | ESTIMATE TOTAL  | 0.00                 |
| 18. SIGNATURE <i>Katie O'Leary</i>   |   |  |                   | PROCESSED BY  |                      |
| 19. DATE<br>6/11/2013  |   |  |                   | PHONE NUMBER  |                      |
| TRANSCRIPT TO BE PREPARED BY   |   |  |                   | COURT ADDRESS   |                      |
| ORDER RECEIVED   |   | DATE   | BY                |   |                      |
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